

New Account

Company Name:		
Director / Manager:		
Contact Details:		
Address:		
	Postcode:	
Telephone:	Mobile:	
Email:		
LPG Express Voucher Code:	Awareness Code:	

Appliances using gas:	<input type="checkbox"/> Hot Water	<input type="checkbox"/> Heating	<input type="checkbox"/> Cooking	<input type="checkbox"/> Other
Purchased appliances from:	<input type="checkbox"/> Elgas	<input type="checkbox"/> Other		
Building Occupancy:	<input type="checkbox"/> Resident	<input type="checkbox"/> Tenant	<input type="checkbox"/> Unknown	

Name of Gas Fitter:		Phone:	
Compliance Number:		Gas Fitter Number:	
Gas Fitter is ready for bottles on (expected date):			

** Please consult your gas installer if location is suitable for:

<input type="checkbox"/> In-situ (Tanker filled)	<input type="checkbox"/> Exchange	Size		Qty	
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** Please ensure that a gas compliance certificate is received by Elgas via the gas fitter or builder before the expected delivery of gas bottles. Email: goldcoast@elgas.com.au

New Owner / Resident Details

Full Name:		D.O.B	
Drivers licence Number:			
LPG Delivery Address:			
	Postcode:		
Mailing Address if different:			
	Postcode:		
Telephone	Mobile:		
Email:			
Print Name:		Signature:	